

011304

01576 U.S. PTO

UTILITY PATENT APPLICATION TRANSMITTAL
(only for new and continuation-in-part
nonprovisional applications under 37 CFR 1.53(b))Client-
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This is a request for filing a

☒ new utility patent application under 37 CFR 1.53(b).☐ continuation-in-part under CFR 1.53(b)(2) of prior
application serial no.Title: PARICALCITOL AS A CHEMOTHERAPEUTIC AGENTInventor(s) (full name of each inventor): H. Phillip Koeffler
and T. Kumagai

Enclosed are:

- ☒ Return receipt postcard
☒ Patent Application Bibliographic Data Sheet
☒ 1 Page application cover sheet
☒ 88 Pages of specification (includes claims and
abstract)
☒ 18 Sheets of drawing(s)
☐ Pages of an executed Declaration for Patent
Application
☐ An executed Power of Attorney for Patent Application
by Assignee
☐ Paper copy of sequence listing, pages
☐ Sequence listing in computer readable form
☐ Statement Under 37 CFR 1.821(f)
☐ An executed assignment and cover sheet
☐ An executed Statement Under 37 CFR 3.73(b)
☐ An executed small entity statement
☐ Request for Nonpublication and Certification
☐ Also enclosed: _____

☐ This application is based on prior foreign application(s)
No. (s) _____, filed in _____ on
_____, respectively, and priority is hereby
claimed therefrom.

☒ This application is based on, and claims the benefit of,
U.S. Provisional Application No. 60/439,932 filed January
13, 2003, and entitled PARICALCITOL AS A CHEMOTHERAPEUTIC
AGENT, and which is incorporated herein by reference.

☐ This application is based on, and claims the benefit of,
U.S. Provisional Application No. 60/_____ (yet to be
assigned), filed _____, which was converted from U.S.

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Serial No. _____, and entitled _____,
and which is incorporated herein by reference.

The filing fee has been calculated as shown below:

| | | | | | Rate | | | | Fee | |
|---|-----------------|---|-----------------|---|-----------------|-----------------|---|-----------------|-----------------|--|
| | Number Filed | | Number Extra | | Small Entity | Other Entity | | Small Entity | Other Entity | |
| Total Claims | 60-20 | = | 40 | x | \$9 | \$18 | = | \$ | \$ | |
| Indepen- dent Claims | 4-3 | = | 1 | x | \$42 | \$84 | = | \$ | \$ | |
| Multiple Dependent Claims Presented: ___ Yes <u>X</u> No | | | | | \$140 | \$280 | | \$ | \$ | |
| | | | | | BASIC FEE | | | \$375 | \$750 | |
| | | | | | TOTAL FEE | | | \$ | | |

___ Please charge my Deposit Account No. _____ in the amount
of \$ _____. A duplicate copy of this sheet is enclosed.

X The payment of the filing fee is to be deferred until the
Declaration is filed. Do not charge our deposit account.

___ The Commissioner is hereby authorized to charge fees under
37 CFR 1.16 and 1.17 which may be required or credit any
overpayment to Deposit Account No. _____. A duplicate
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Respectfully submitted,

Date: January 13, 2004

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